

White House Conference on Aging Listening Session, Miami, Florida

Good afternoon. My name is Robert McFalls and I am the Chief Executive Officer for the Area Agency on Aging, Palm Beach/Treasure Coast, Inc. that covers Planning and Service Area 9 here in Florida. Much of my remarks here today will be made in my role as the Immediate Past President of the National Association of Area Agencies on Aging.

First, I want to join with my colleagues in thanking you for coming to the grassroots—literally, to the “field” of aging, where we strive on a daily basis to carry out the important work of aging strategies that emphasize the maximum independence, choice and dignity possible for everyone. We are honored that you have chosen Florida—a state we could easily term a macrocosm for aging—to conduct your first listening session in preparation for our nation’s 5th White House Conference on Aging.

I began my career at the age of 21 as a senior center director, and for the past 27 years (24 at the AAA level), I have participated in a number of meetings and discussions focused on the aging of America’s population. The reality of those conversations is now here as we continue to celebrate our nation’s gains in longevity and the sheer numbers that are being driven by the aging of the Boomers. Indeed, all of here today realize that the older population has more than tripled in the last 100 years (4.1% to 12.4%) with a tenfold increase in the actual number of citizens over the age of 65.

According to the most recent population data furnished by the Florida Department of Elder Affairs, the population age 60 and older statewide now represents 22.5% of the total. For PSA 9 that same population, i.e., individuals 60+, represent 28.7% of our total population. Our senior population now numbers over 501,258 individuals, making us number one in senior population among all of Florida’s Area Agencies on Aging. In fact, our area gained 20,132 seniors in the last year alone. Suffice it to say, like many of our peer AAAs in this wonderful state, our service area actually has more

seniors living within it than 19 different states have in their entire population.

Over 30% of the seniors residing in our service area are caregivers. Whereas elders occupy 18.5% of housing units statewide, they occupy 40% in our service area. With respect to living situation, one out of five of our area's senior residents live alone. With respect to seniors with very high or high needs, some 10% of our seniors fall into this category in comparison to 9.8% of the senior population statewide. Indeed, the challenges of an aging population are everywhere.

The Older Americans Act establishes that the Area Agency on Aging shall be the "leader relative to all aging issues" on behalf of the elders who reside within its service area. Furthermore, the Older Americans Act charges the AAA with the responsibility of providing through a comprehensive and coordinated service delivery system an array of services that support the independence of seniors. One of the greatest opportunities that the aging population represents is that of social engagement. Our AAA has a number of volunteer opportunities—Retired & Senior Volunteer Program (RSVP), Foster Grandparent Program (FGP), AmeriCorps, Advocates for Elder Victims of Crime—that engage over 3,500 senior volunteers over the course of a year's time. An additional initiative begun at the community level—our Leadership Institute for Active Aging—was chosen as a program champion by the Administration on Aging this past May as a part of Older Americans Month celebrations. This program recruits retired professionals who go through a class experience and then choose engagement with one or more nonprofit associations. For example, a retired organizational development educator is currently working with the AAA, and a retired podiatrist/nurse/pharmacist team lead our volunteer driven wellness team. Nationally, 45% of today's older Americans volunteer annually, donating 1.8 billion hours of their time at an estimated value of \$22.7 billion. Baby Boomers, on the other hand, are reporting different interests in volunteering than the currently older generation—they want more meaningful work, flexible hours and expect professional management. An investment of expertise and some level of capacity building resource (meaning dollars) will be required if we are going to replicate these kinds of initiatives across local communities.

The dramatic rise in the numbers of older Americans will impact on every aspect of our lives. The entire social, physical and financial fabric of communities will be affected by the coming age wave. Are we ready? Probably not as ready as we should be. We need to focus on strategies that help communities to become not only good places for people to grow up but also for them to grow old. To this end, we must strengthen our efforts in preparation for the multitude of challenges for aging in place.

In this regard, our AAA joins with the National Association of Area Agencies on Aging in specifically calling on the White House Conference on Aging to support the following efforts:

- Add voice and support for the enactment of a new Title VIII within the Older Americans Act, National Community Aging Readiness Program (NCARP):

Authorize and fund a 10-year effort, to sunset in 2015, to prepare every state and every community in the nation for the implications and effects of the demographic trends of longevity, “aging in place” and other realities of the aging “baby boom” generation.

The scope of community planning would include coordination of health, human services, housing, land use, transportation, public safety, parks/recreation, lifelong learning/job retraining, and volunteerism/civic engagement. Title VIII funding would be non-formula based, with a minimum level of funding to allow each AAA/Title VI agency and state unit on aging to hire a full time, dedicated employee to serve as the community-based aging planning coordinator. The Title should provide for additional formula-based funding based on population and rural factors to increase resources to more heavily populated service areas and those serving large geographic areas.

In addition, sufficient funds should be made available to each AAA/Title VI agency to assure the ability to convene and facilitate a planning process and then to promulgate the results such of planning efforts.

The Area Agency on Aging/Title VI Agency shall be the convener of a collaborative planning and implementation effort to:

- a) Prepare communities for the increase in older population and assist leaders in adapting services – such as housing, transportation, health care, shopping, recreation and other services – to successfully adapt to older constituents and consumers.
- b) Divert individuals from reliance of publicly funded programs through more efficient and effective planned use of private resources.
- c) Build community capacity to offer options to institutional care.
- d) Provide enhanced public education and information about the need to plan for long-term living options.
- e) Establish incentives and disincentives (tax policy, etc) for planning or failure to plan for one's future.

Title VIII would also establish a National Resource Center on Aging in Place to provide the necessary guidance, training and technical assistance to communities.

- We also believe that the aging network's role in serving as the single point of entry—like the Aging and Disability Resource Centers are currently modeling across the nation and soon our state—should be strengthened with respect to long term living service delivery and planning efforts.
- And, finally, given the evidence based positive effects that health promotion and prevention play in promoting and improving the physical and mental well-being of older adults, we need to build on the alliances that the Administration on Aging has forged with the Centers for Disease Control and other agencies within HHS. To this end, we would call for stronger recognition and strengthening of the interface between Older Americans Act Programs—and those of us who carry them out at AAAs and throughout our community partnership efforts—and other health, wellness and disease prevention

initiatives. The aging network's role in case management and chronic disease management initiatives is strongly demonstrated and should be reviewed and affirmed.

Thank you again for this opportunity and for the important work that you are doing on behalf of America's growing elder population.

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